

**TENNESSEE GENERAL ASSEMBLY  
FISCAL REVIEW COMMITTEE**



**FISCAL NOTE**

**SB 884 - HB 1073**

February 18, 2013

**SUMMARY OF BILL:** Authorizes a person's surrogate to apply on behalf of the person for voluntary admittance into a public or private hospital or treatment resource for diagnosis, observation and treatment of a mental illness or serious emotional disturbance. The admission can be no longer than 21 days unless a petition has been filed pursuant to Title 33, Chapter 6, Part 5, or the person subsequently applies for admission and meets any of the criteria currently enumerated by Tenn. Code Ann. § 33-6-201. Also authorizes the person's surrogate to request the person's release from the hospital or treatment resource and to authorize the release of confidential information regarding the person that has been provided or received in connection with the services provided to the person. A surrogate is an individual, other than a patient's agent or guardian, authorized to make a health care decision for the patient under the Tennessee Health Care Decisions Act.

**ESTIMATED FISCAL IMPACT:**

**NOT SIGNIFICANT**

**Assumptions:**

- Tenn. Code Ann. § 33-6-201 currently authorizes the following persons to apply for voluntary admission: a person who is 16 years of age or older and who does not lack capacity; a parent, legal custodian, or legal guardian acting on behalf of a child; a conservator expressly granted such authority by a court; a qualified mental health professional acting on the basis of the terms of the person's declaration for mental health treatment; a person's attorney in fact under a durable power of attorney for health care; and a caregiver who is acting on behalf of a child pursuant to the Power of Attorney for Care of a Minor Child Act.
- According to the Department of Mental Health and Substance Abuse Services, the fiscal impact on the Department will be not significant because the regional mental health institutes (RHMI) rarely have voluntary admissions as initial admissions.
- According to the Bureau of TennCare, the proposed legislation will not change the MCOs' authority over prior approval based on medical necessity and utilization review. Any impact will not be significant.

**CERTIFICATION:**

The information contained herein is true and correct to the best of my knowledge.

A handwritten signature in black ink, appearing to read "Lucian D. Geise". The signature is fluid and cursive, with the first name "Lucian" written in a larger, more prominent script than the last name "Geise".

Lucian D. Geise, Executive Director

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